



FEE TRANSMITTAL

Docket No.		4004-033-30	
Serial No.		10/088,295	
Filing Date		May 24, 2002	
Inventor(s)		Pierre GOELFF et al.	
Group Art Unit		1775	
Examiner		Vivek D. Koppikar	
TOTAL AMOUNT OF PAYMENT		\$2,816.00	

1. <input type="checkbox"/> Applicant claims small entity status. <input checked="" type="checkbox"/> Charge any UNDERPAYMENT or credit any OVERPAYMENT in the indicated fees to Deposit Account No. 50-1442. <input type="checkbox"/> Charge the indicated fees to Deposit Account No. 50-1442.										FEE CALCULATION (continued)					
2. <input checked="" type="checkbox"/> Check enclosed.										3. ADDITIONAL FEES					
					Large Entity		Small Entity		Fee Description						
					Fee Code	Fee (\$)	Fee Code	Fee (\$)				Fee Paid			
FEE CALCULATION					1051	130	2051	65	Surcharge-late filing fee or oath						
1. BASIC FILING FEE					1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet						
Large Entity		Small Entity		Fee Description		1053	130	1053	130	Non-English Specification					
Fee Code	Fee (\$)	Fee Code	Fee (\$)			Fee Paid		1251	110	2251	55	1-mo. ext. of time			
1001	770	2001	385	Utility filing fee		1252	420	2252	210	2-mo. ext. of time					
1002	340	2002	170	Design filing fee		1253	950	2253	475	3-mo. ext. of time					
1003	520	2003	260	Plant filing fee		1254	1480	2254	740	4-mo. ext. of time					
1004	770	2004	385	Reissue filing fee		1255	2010	2255	1005	5-mo. ext. of time		2010			
1005	160	2005	80	Provisional filing fee		1401	330	2401	165	Notice of Appeal					
SUBTOTAL (1)					\$0.00		1402	330	2402	165	Appeal Brief				
2. EXTRA CLAIM FEES					1403	290	2403	145	Request for Oral Hearing						
tot. claims		27	-	25*	=	2	x	\$18	=	36	1501	1330	2501	665	Utility/Reissue Issue Fee
ind. claims		2	-	3*	=	0	x	\$86	=	0	1502	480	2502	240	Design Issue Fee
<input type="checkbox"/>		Multiple Dependent Claims			\$290	=		1504	300	1504	300	Publication Fee			
Large Entity		Small Entity		Fee Description		8001	3	8001	3	Advance Copy of Patent					
Fee Code	Fee (\$)	Fee Code	Fee (\$)			1460	130	1460	130	Petitions to the Commissioner					
1202	18	2202	9	Claims in excess of 20		1806	180	1806	180	IDS Submission					
1201	86	2201	43	Independent claims in excess of 3		8021	40	8021	40	Assignment recordation					
1203	290	2203	145	Multiple dependent claim, if not paid		1801	770	2801	385	For Filing RCE		770			
1204	84	2204	43	*Reissue independent claims over original patent		1814	110	2814	55	Terminal Disclaimer					
1205	18	2205	9	*Reissue claims in excess of 20 and over original patent		OTHER (indicate below):									
SUBTOTAL (2)					\$36.00										
* or number previously paid, if greater; For Reissues, see above										SUBTOTAL (3)		\$2,780.00			

Name	Jerold I. Schneider		Registration No.		24,765	
Signature			Date	April 23, 2004	Telephone	202-861-3900
Name			Registration No.			